



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 9571

SERIAL NUMBER 09/371,716	FILING DATE 08/09/1999  RULE	CLASS <del>407</del> 715	GROUP ART UNIT 2176	ATTORNEY DOCKET NO. 884.006US2
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APPLICANTS

IGOR SINYAK, MOUNTAIN VIEW, CA;  
DAVID L. SPRAGUE, GILBERT, AZ;

*Assignee  
INTEL*

\*\* CONTINUING DATA \*\*\*\*\*  
This application is a CON of 09/204,006 12/01/1998 ABN *OK* *(No action on the merits)*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 08/27/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 9
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35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged *William B. Baker* *WB*  
Examiner's Signature Initials

ADDRESS  
21186  
SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.  
P.O. BOX 2938  
MINNEAPOLIS , MN  
55402

TITLE  
DATA DISPLAY USING MULTICOLUMN SCROLLING

FILING FEE  RECEIVED 1556	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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☐ Other \_\_\_\_\_

☐ Credit

APPLICATION NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO
09/371,716	08/09/1999	707	2176	884.006US2..

APPLICANT  
IGOR SINYAK, MOUNTAIN VIEW, CALIFORNIA; DAVID L SPRAGUE, GILBERT, ARIZONA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED THIS APPLN IS A CON OF 09/204,006 12/01/1998 ABN *(No action mailed)*

\_\_\_\_\_  
*None*

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED  
*None*

Assignee: Intel

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED  
*None*

FOREIGN FILING LICENSE GRANTED 08/27/1999

Foreign priority claimed 35 USC 119 (a-d) conditions met	O yes O no O yes O no O Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and acknowledged	Examiner's Name Initials	AZ	9	31	9

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MINNEAPOLIS , MN 55402

TITLE  
DATA DISPLAY USING MULTICOLUMN SCROLLING

FILING FEE RECEIVED  \$*1556	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	O All Fees O 1.16 Fees (Filing) O 1.17 Fees (Processing Ext. of Time) O 1.18 Fees (Issue) O Other _____ O Credit
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